



Position Statement

Connecticut Association of Area Agencies on Aging, Inc.

Friday, February 17, 2012

Good evening Senator Harp, Representative Walker and Esteemed Members of the Committee:

My name is Maureen McIntyre and I am the Assistant Director of the North Central Area Agency on Aging. I am here tonight on behalf of C4A, the CT Association of Area Agencies on Aging, to urge you to reverse the Governor's proposed 10% reduction of the Connecticut Statewide Respite Program which serves families struggling with the effects of Alzheimers Disease and related dementias.

As calls to our agencies' CHOICES programs will attest, CT's families are struggling mightily under the weight of the state's economic downturn. Caring for loved ones with Alzheimers disease and other related dementias exponentially magnifies today's most common stressors such as financial insecurity and the rising costs of everything from heating oil to health care.

Connecticut is home to over 350,000 family caregivers and according to a MetLife survey, by virtue of their caregiving roles 70% of working caregivers will suffer work-related difficulties due to their dual roles¹ and between 40 - 70% of all family caregivers have clinically significant symptoms of depression with about a quarter to half of these caregivers meeting the diagnostic criteria for major depression.² The Statewide Respite Program provides a valuable safety net to these individuals who wish to maintain their family members at home in lieu of more costly institutional care but who rise to this challenge at significant personal cost.

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We at C4A ask that you also consider the following:

- Individuals aged 65 and over constitute the fastest growing segment of CT's population.
- CT ranks 10th nationally in the number of individuals aged 85+. And,
- Alzheimers Disease strikes *one in eight Americans aged 65 years and older*, and more than *one in three Americans 85 years and older*.³

Unfortunately and cruelly, however, Alzheimers is not only an age-related disease. 5% of cases annually occur in those between the ages of 30 and 60. And, as the caregivers of early-onset patients are often still of working age, the availability of respite care may be their last link to continued employment and future economic stability.

On the strength of our demographics alone, Connecticut should be enhancing its menu of services for individuals suffering from Alzheimers Disease and the families that care for them. Failing to do so not only jeopardizes the health and well-being of our citizens but also contradicts Connecticut's stated objective of rebalancing its long term care system in favor of community based services and supports.

For the state fiscal year ending June 30, 2011, Statewide Respite Program services allowed 92% of our clients to remain at home during at least some portion of the program year. 79% of our clients remained at home for the entire program year and the program reduced the stress and improved the quality of life for 98% of the family caregivers receiving our program's services.

C4A requests that the Committee question the wisdom of a 10% cut to a program that is consistent with Connecticut's commitment to enhancing community based care, that benefits the fastest growing cohort of Connecticut residents, and that significantly strengthens the economic stability of Connecticut's families.

Thank you so very much for your time and attention.

Respectfully submitted,
Maureen C. McIntyre

¹National Alliance for Caregiving and AARP. *Caregiving in the U.S.*. Bethesda, MD: National Alliance for Caregiving, and Washington, DC: AARP. 2009

²Zarit, S. (2006). Assessment of Family Caregivers: A Research Perspective. In Family Caregiver Alliance (Eds.), *Caregiver Assessment: Voices and Views from the Field*. Report from a National Consensus Development Conference (Vol. II) (pp. 12‐37). San Francisco: Family Caregiver Alliance

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